

POSITION	ID NO.	DATE
CLASSIFIER	28	7/23/93
EXAMINER	452	7-31-95
TYPIST	357	10/31/96
VERIFIER	851	10-31
CORPS CORR.		
SPEC. HAND		
FILE MAINT.	452	8-1-95
DRAFTING		

BEST AVAILABLE COPY

# INDEX OF CLAIMS

Claim	Date
Final	
Original	
1	1/2/97
2	2/25/97
3	3/1/97
4	4/1/97
5	5/1/97
6	6/1/97
7	7/1/97
8	8/1/97
9	9/1/97
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46	46/1/97
47	47/1/97
48	48/1/97
49	49/1/97
50	50/1/97

Claim	Date
Final	
Original	
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## SYMBOLS

- ✓ ..... Rejected
- ..... Allowed
- (Through numeral) ..... Canceled
- ..... Restricted
- N ..... Non-elected
- I ..... Interference
- A ..... Appeal
- O ..... Objected

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